

**Today's Date:** \_\_\_\_\_

To: The Board of City Service Commissioners

I, \_\_\_\_\_, appeal the action of the

\_\_\_\_\_  
(candidate's name)

Department for removing

\_\_\_\_\_  
(department name)

my name from the \_\_\_\_\_ eligible list.

\_\_\_\_\_  
(job title)

The letter I received was dated \_\_\_\_\_ . It said I was removed

\_\_\_\_\_  
(date of letter)

from the list *(check all that apply)*:

- ☐ Due to my failure to disclose significant information regarding my conviction record.
- ☐ Because I did not successfully pass one of the pre-employment requirements for this position.
- ☐ Based upon my previous work record.
- ☐ Because I have not responded to interview notices.
- ☐ Due to the nature *(relevancy)* of my convictions.
- ☐ Based upon an unsatisfactory driving record.
- ☐ Due to a previous Discharge or Resignation in Lieu thereof.
- ☐ Because I do not meet one of the minimum requirements for the position *(e.g. license, experience)*.
- ☐ Other *(please explain)*:

\_\_\_\_\_  
\_\_\_\_\_

I am appealing this decision because *(attach additional sheet if necessary)*:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
(signature)

\_\_\_\_\_  
(address)

\_\_\_\_\_  
(telephone number)